rney's Docket Number:

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As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of	which (check only one item below):	
[] is attached heret	o .	
[X] was filed as Unit	ed States application	
Application No. <u>to be</u>	assigned	
on <u>April 5, 1999</u>		
and was amended		
on		
[] was filed as PCT	international application	
Number		
on		
and was amended under	PCT Article 19	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign applications(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISONAL	/FOREIGN/PCT APPLICATION	S) AND	ANY PR	IORITY	CLAIMS	UNDER	35 U.S.	C. 119:
COUNTRY			DATE OF	FILING		PRI	ORITY CI	LAIMED

(if PCT, indicate "PCT")	APPLICATION NUMBER	(day, month, year)	UNDER 35 USC 119
Denmark	0543/98	20 April 1998	[x] YES [] NO
United States	60/083,277	28 April 1998	[x] YES [] NO
			[] YES [] NO
			[] YES [] NO
			[] YES [] NO
			[] YES [] NO

PPLICATION AND POWER OF ATTORNE ational Applications)

orney's Docket Number:

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S.	APPLICATIONS	OR	PCT	INTERNATIONAL	APPLICATION	S DESIGNATING	THE	U.S.	FOR	BENEFIT
				UNDER 35 U	J.S.C. 120:					

	U.S. APPLICATIONS						STATUS (Check one)			
	U.S. APPLI	CATION NUMBER		U.S. FILING DATE	Pat	ented	Pending	Abandoned		
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	prosecute	this application	named and tr	ansact all bu	hereby appoint the following siness in the Patent and Trad	g attori emark O	ney(s) a ffice co	nd/or agent(s nnected therew) to vith.	
		Elias J. Lambiri Reg. No. 33,728		eta A. Gregg . No. 35,127		L. Sta		Reza Green		
= -	NO. 30,333	Reg. No. 33,726	Reg	. NO. 33,127	keg. NO. 36,993 Reg. N	o. 41,3		Reg. No. 38,47	7.5	
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Send Correspondence to: Steve T. Zelson, Esq. Novo Nordisk of North Ameri 405 Lexington Avenue, Suite										
	New York, New York 10174-6							eve T. Zelson (212) 867-0123		
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	Post Office Address							zip Code/Country zerland		
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	Residence & Citizenship	City	***		State or Foreign Country	Country of Citizenship				
	Post Office Address	Post Office Address			City		State & Zip	Code/Country		

COM (In	BINED DECLA cludes Refe	RATION FOR PATE rence to PCT In	PPLICATION ational A	N AND POWER OF ATTORNEY pplications)		.200-US		
5	Full Name of Inventor	Pamily Name		First Given Name		Second Given Name		
	Residence & Citizenship	City		State or Poreign Country		Country of Citizenship		
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6	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City	•	State or Foreign Country	Country of Citizenship			
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7	Full Name of Inventor	Pamily Name		First Given Name		Second Given Name		
	Residence & Citizenship	City		State or Poreign Country		Country of Citizenship		
	Post Office Address	Post Office Address		City		State & Zip Code/Country		
8	Full Name of Inventor	Family Name		Pirot Given Name		Second Given Name		
	Residence & Citizenship	City		State or Poreign Country		Country of Citizenship		
	Post Office Address	Post Office Address		City		State & Zip Code/Country		
[9]	Full Name of Inventor	Pamily Name		Piret Given Name		Second Given Name		
	Residence & Citizenship	City		State or Poreign Country	Country of Citizenship			
3	Post Office Address	Post Office Address		City		State & Zip Code/Country		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.								
******	ure of Inventor 1		Signature of Inven	tor 2	ire of Inventor 3			
Date			Date Date					
Signature of Inventor 4			Signature of Inventor 5 Signa			gnature of Inventor 6		
Date			Date		Date			
Signature of Inventor 7			Signature of Invent	tor 8	Signatur	e of Inventor 9		
Date			Date		Date			